GW/U	S <del>√</del> -3 Notic	e of Intent: UST F	Permanent C	losure	or Change	In-Service	
FOR TANKS IN <b>NC</b>	The appropriate DEM Regional Office according to the facility's location. [SEE REVERSE SIDE OF OWNER'S COPY (PINK) EQUIPMENT (DATE OF REGIONAL OFFICE ADDRESS].				State Use O I. D. Numbe Date Receiv	·	
INSTRIUCTION <sup>OS</sup> Complete and return five (5) working days prior to classife or change-in-service.  Winston-Salesia							
LOWNERSHIP OF TANK(S) REGIONAL OTHER ILLOCATION OF TANK(S)							
	ner Name: Adjutant Ge	Facility Name or Company: National Guard					
Street Address: 4105 Reedy Creek Rd			Facility ID # (if available):				
County:			Street Address or State Road: 201 West 9th Avenue				
City: Ral	eigh State: NC	County: <u>Davidson</u> City: <u>Lexington</u> Zip Code:					
Tele. No. (Area Code): (919) 664-6183 Tele. No. (Area Code): (70					704) 246–27	98	
III. CONTACT PERSON							
Name: M	r. Todd Preddy	Job Title:				919) 664-6183	
2.40%	IV. TANK	REMOVAL, CLOSURE	IN PLACE, CHAN	IGE-IN-SEF	RVICE		
<ol> <li>Plan the entire closure event.</li> <li>Conduct Site Soil Assessments.</li> <li>If Removing Tanks or Closing in Place refer to API Publications</li> <li>Torage Tanks &amp; 1604 "Removal &amp; Disposal of Used</li> <li>Provide a sketch locating piping, tanks and soil sampling locations.</li> <li>Frovide a sketch locating piping, tanks and soil sampling locations.</li> <li>Fill out form GW/UST-2 "Site or Licensed Geologist. After January 1, 1994, all closure site assessment reports must be signed and sealed by a P.E. or L.G.</li> <li>Keep closure records for 3 years.</li> </ol>							
V. WORK TO BE PERFORMED BY:							
(Contractor) Name: SPATCO Environmental, Inc.							
Address: 556-A Arbor Hill Rd. K'ville State: North Carolina Zip Code: 27284							
	Contact: Randall Shreve Phone: (910) 996-0573						
	onsultant: SPATCO Env		1 1101101	800) 873-			
VI. TANK(S) SCHEDULED FOR CLOSURE OR CHANGE-IN-SERVICE							
TANK ID#	TANK CAPACITY	LAST CONTE	NTS		PROPOSED CLOSURE	CHANGE-IN-SERVICE	
1	6,000	#2 Fuel 0il	:	Remov	In Place	nt New Contents Stored	
				<del>X</del>			
	<u> </u>					· · · · · · · · · · · · · · · · · · ·	
	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	.			
	VII.OW	NER OR OWNER'S AUT	HORIZED REPRE	SENTATI	/E		
Print name and official title  Randall Shreve, Site Supervisor  *Scheduled Removal Date: 4/22/96							
Signature:	Kandall She	Date Submitted: 4/15/96					
*If scheduled	work date changes, notify your app	ropriate DEM Regional Office 4					
GW/UST-3 (	(Rev. 05/94) White Copy - 凡	egional Office Yellow	Copy - Central Office		Pink Copy	- Owner	
		)					

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## SPATCO F Environmental, Inc.

DATE:	<u>5-aa-96</u>
ATTENTION: _	Ms. Cindy Rintoul
COMPANY:	NCDEHNR
FAX NUMBER:	771-4632
FROM:	Sandy Nwabueze
NUMBER OF PAGES: (INCLUDING COVER SHEET)	2
REMARKS:	
GW/UST	-3 Form. Per your
Conversa	tion with Preddy Todd
early 4	his morning.
IF ANY PORTION OF TH	IS TRANSMITTAL IS UNCLEAR, PLEASE CALL 910,996.0573.
HARD COPY TO FOLL	OW BY MAIL? YES NO

Providing Practical

Solutions for Today's

Environmental Problems...

556-A Arbor Hill Road Kernersville, NC 27284-3321 910.996.0573 FAX.996.0530

## 05/22/96 WED 09:02 FAX 910 996 0530 **2**0002 Sandy Nwabueze GW/UST-3 Notice of Intent: UST Permanent Closure or Change-In-Service FÖR Return Completed Form To: TANKS State Use Only The appropriate DEM Regional Office according to the county of the facility's IN location. (SEE REVERSE SIDE OF OWNER'S COPY (PINK) FOR REGIONAL I. D. Number NC OFFICE ADDRESS). Date Received INSTRUCTIONS Complete and return five (5) working days prior to closure or change-in-service. I. OWNERSHIP OF TANK(S) II. LOCATION OF TANK(S) Adjutant General of NC Facility Name or Company: Notional Guard Tank Owner Name: (Corporation, Individual, Public Agency, or Other Entity) Street Address: 4105 Reedy Creek Rd Facility ID # (if available): \_\_ 201 West 9th Avenue County: ... Street Address or State Road: \_ City: Raleigh Zip Code: 27607 State: County: <u>Davidson</u> City: <u>Lexington</u> Zip Code: \_\_\_\_ (919) 664-6183 (704) 246-2798 Tele, No. (Area Code): Tele. No. (Area Code): III. CONTACT PERSON Name: Mr. Todd Preddy Job Title: Telephone Number:( 919) 664-6183 IV. TANK REMOVAL, CLOSURE IN PLACE, CHANGE IN SERVICE 1. Contact Local Fire Marshall. Underground Petroleum Storage Tanks". 7. The site assessment portion of the tank 2. Plan the entire closure event. Provide a sketch locating piping, closure must be conducted under the 3. Conduct Site Soil Assessments. tanks and soil sampling locations. supervision of a Professional Engineer 4. If Removing Tanks or Closing in 6. Fill out form GW/UST-2 "Site or Licensed Geologist. After January 1, Place refer to API Publications Investigation Report for 1994, all closure site assessment 2015 "Cleaning Petroleum Permanent Closure" and return reports must be signed and sealed Storage Tanks" & 1604 "Rewithin 30 days following the site by a P.E. or L.G. moval & Disposal of Used investigation. 8. Keep closure records for 3 years. V-WORKITO BE PERFORMED BY: SPATCO Environmental, Inc. (Contractor) Name: Address: 556-A Arbor Hill Rd. K'ville State: North Carolina 27284 Zip Code: Contact: Randall Shreve (910) 996-0573 Phone: SPATCO Environmental, LLP Primary Consultant: (800) 873-1250 Phone:\_\_\_\_ VI.TANK(S) SCHEDULED FOR CLOSURE OR CHANGE-IN-SERVICE PROPOSED ACTIVITY TANK ID# TANK CAPACITY LAST CONTENTS CLOSURE CHANGE-IN-SERVICE Removal Abandonment In Place New Contents Stored 1 6,000 #2 Fuel Oil VII OWNER OR OWNER'S AUTHORIZED REPRESENTATIVE Print name and official title Randall Shreve, Site Supervisor \*Scheduled Removal Date: 4/22/96

Signature:

"If scheduled work date changes, notify your appropriate DEM Regional Office 48 hours prior to originally scheduled date.

4/15/96

Date Submitted: